PTO/SB/21 (08-00)

Please type a plus sign (+) inside this box -> [+]

February 21, 2003

addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date:

Date

Typed or printed name

Signature

Approved for use through 10/31/2002. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Application Number 09/639,273 **TRANSMITTAL** August 15, 2000 **Filing Date FORM** First Named Inventor Michael A. Innis et al FEB 2.8 **1**003 (to be used for all correspondence after initial filing) Group Art Unit 1646 Eliane Lazar-WesleECH CENTER 1800/2900 **Examiner Name** Total Number of Pages in This Submission Attorney Docket Number 012441.00002 ENCLOSURES (check all that apply) After Allowance Communication to Assignment Papers Fee Transmittal Form (for an Application) Group Appeal Communication to Board of Fee Attached ■ Drawing(s) Appeals and Interferences Appeal Communication to Group Amendment / Response w/Exhibit A Licensing-related Papers (Appeal Notice, Brief, Reply Brief) Petition After Final Proprietary Information Petition to Convert to a ☐ Affidavits/Declarations Status Letter **Provisional Application** Power of Attorney, Revocation Other Enclosure(s) Extension of Time Request Change of Correspondence Address (please identify below): Terminal Disclaimer Express Abandonment Request Request for Refund RECEIVED Information Disclosure Statement CD, Number of CD(s) Certified Copy of Priority FEB 2 7 2003 Remarks Document(s) Response to Missing Parts/ TECH CENTER 1600/2900 Incomplete Application Response to Missing Parts under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm Michelle L. Holmes-Son, Reg. No. 47,660 Individual name Signature

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be send to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Date

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope

1545

U.S. Patent and Tracer k Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

FEÈ	TRA	AN	SMI	TT	AL
1	for l	FY	200	3	

Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT 110

	Complete if Know	WI DEC
Application Number	09/639,273	NECEIVE
Filing Date	August 15, 2000	
First Named Inventor	Michael A. Innis et al	FEB 2 7 200
Examiner Name	Eliane Lazar-Wesley	770
Art Unit	1646	TECH CENTER 1600/20
Attorney Docket No.	PP0991.1050/12441.0	00002

METHOD OF PAYMENT (check all that apply)					FEE C	ALCULATION (continued)	
		3. ADI	DITIONA	L FEES			
☐ Check ☐ Credit card ☐ Money ☐ Other ☐ None ☐ Order		Large	Entity	Small E	ntity		
Deposit Account:		Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
Deposit Account	19-0733	1051	130	2051	65	Surcharge - late filing fee or oath	
Number 19-07	190733	1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet.	
Deposit Account Banner & Witcoff, Ltd. Name		1053	130	1053	130	Non-English specification	
		1812	2,520	1812	2,520	For filing a request for exparte reexamination	
The Commissioner is authorized to: (check all that apply) ☐ Charge fee(s) indicated below ☐ Chedit any overpayments ☐ Charge any additional fee(s) during the pendency of this application ☐ Charge fee(s) indicated below, except for the filling fee to the above-identified deposit account.		1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
		1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
		1251	110	2251	55	Extension for reply within first month	110.00
FEE CALCULATION			410	2252	205	Extension for reply within second month	
1. BASIC FILING FEE			930	2253	465	Extension for reply within third month	
Fee Fee F	<u>Small Entity</u> ee Fee <u>Fee Description</u>	1254	1,450	2254	725	Extension for reply within fourth month	
117	ode (\$) Fee Paid	1255	1,970	2255	985	Extension for reply within fifth month	
	001 375 Utility filing fee	1401	320	2401	160	Notice of Appeal	
	002 165 Design filing fee	1402	320	2402	160	Filing a brief in support of an appeal	
	003 260 Plant filing fee	1403	280	2403	140	Request for oral hearing	
	004 375 Reissue filing fee 005 80 Provisional filling fee	1451	1,510	1451	1,510	Petition to institute a public use proceeding	
•		1452	110	2452	55	Petition to revive – unavoidable	
	SUBTOTAL (1) (\$) 0	1453	1,300	2453	650	Petition to revive - unintentional	
2. EXTRA CLAIM	FEES	1501	1,300	2501	650	Utility issue fee (or reissue)	
2. 2. 	Extra Fee from Fee	1502	470	2502	235	Design issue fee	
	Claims below Paid	1503	630	2503	315	Plant issue fee	
otal Claims	** = 0	1460	130	1460	130	Petitions to the Commissioner	
ndependent laims	- ++ = 0 X	1807	50	1807	50	Processing fee under 37 CFR 1.17 (q)	
fultiple	x = 0	1806	180	1806	180	Submission of Information Disclosure Stmt	FEN
Dependent ^ Small Entity		8021	40	8021	40	Recording each patent assignment per property (times number of	CEN.
Fee Fee	Fee Fee Description					properties)	FER L
Code (\$) 1202 18	Code (\$) Fee Description 2202 9 Claims in excess of 20	1809	750	2809	375	Filing a submission after final rejection (37 CFR § 1.129(a))	,,,
1201 84	2201 42 Independent claims in excess of 3	1810	750	2810	375	For each additional invention to be	1,, 6474
1203 280	2203 140 Multiple dependent claim, if not paid					examined (37 CFR § 1.129(b))	174 M
1204 84	2204 42 ** Reissue independent claims over original patent		750	2801	375	Request for Continued Examination (RCE)	<u> </u>
1205 18	2205 9 ** Reissue claims in excess of 20 and over original patent	1802	900	1802	900	Request for expedited examination of a design application	
	SUBTOTAL (2) (\$) 0	Other (ee (spec	ify)	-		
**or number prev	iously paid, if greater; For Reissues, see above	*Redu	iced by B	asic Filin	g Fee P	raid SUBTOTAL (3) (\$) 116	0

SUBMITTED BY Complete (if applicable)						
Name (Print/Type)	Michelle L. Holmes-Son	Registration No. Attorney/Agent)	47,660	Telephone	(202) 508-9100	
Signature	Mulder	A Holyes-A-		Date	February 21, 2003	